

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2008		Docket Number (Optional) 77012 - 325124
(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818.)		
Application Number 10/750,576		Filed December 30, 2003
For CHAIR BACK REST WITH IMPROVED RESILIENCE AND SUPPORT		
Art Unit 3636		Examiner WHITE, Rodney Barnett
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):</p>		
	Fee	Small Entity Fee
<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$130	\$65
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$490	\$245
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1110	\$555
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1730	\$865
<input checked="" type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2350	\$1175
		\$ 2,350.00
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. <input type="checkbox"/> A check in the amount of the fee is enclosed. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. <input type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>06-0029</u> . I have enclosed a duplicate copy of this sheet. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.		
<p>I am the</p> <p><input type="checkbox"/> applicant/inventor.</p> <p><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71 Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).</p> <p><input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>55,172</u></p> <p><input type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34. _____</p> <hr/>		
<u>/Benjamin S. Fernandez/</u> Signature <u>Benjamin S. Fernandez</u> Typed or printed name		June 22, 2011 Date 303-607-3709 Telephone Number
<small>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</small>		
<input type="checkbox"/> Total of _____ forms are submitted.		
SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.		